



Learning to *Really* Talk with your Hands



Sign Language Instructor, Jennifer White is showing Barbara Klagges (l) and Valarie Diamond (r) how to make the sign for fever.

Congratulations to Valarie Diamond, Barbara Klagges, Martha Neff-Smith, Andrea Ewing-Thomas, Jacqueline Thompson-Walker, and Claudia Vento who recently completed the nine hour Sign Language for Dispensing Sites class.

As a child of deaf parents Instructor Jennifer White has a first hand knowledge of American Sign Language (ASL). It was her first language. Jennifer shared many interesting facts about talking through sign language with the deaf community. As a child, even if asked to be quiet, she could still talk through sign.

Speaking in sign language is similar to other languages. There is a sign for each letter of the alphabet and number. Some words also have a sign and do not have to be spelled. ASL, like any other language, has its slang. When speaking in ASL you use the verb first and then the adjective and noun. There are no articles, conjunctions or prepositions.

It takes a lot of practice to learn ASL and continuous use to remember it. Sign language bingo made practicing interesting. Watching TV, using the computer, and listening to the radio are ways to practice sign language.

Volunteer Martha Neff-Smith loved the class. "I learned more in a few weeks than I could have imagined. If there is ever an issue of terrorism, I will now be more confident in helping ALL of the people. I will continue to learn through some DVDs I purchased on American Sign Language."

Valarie Diamond found the class very beneficial. "I believe I've learned enough to communicate with a deaf person not just during a disaster, but possibly in other situations. I've even been encouraged enough to take a full sign language class at Germanna."

From this class, Jackie Thompson-Walker's self perception is "that I can more effectively communicate with the deaf community, which is a part of my employment. I am also more comfortable as a community volunteer."

Volunteer Appreciation Week

April 17th through the 23rd was National Volunteer Appreciation week.

Thank you to the 234 people who have joined the Rappahannock-Rapidan Medical Reserve Corps during the past year. You are greatly appreciated by the staff of the Rappahannock-Rapidan Health district. It is wonderful to know you are there when you are needed.

However, you are more than just volunteers - you are concerned, dedicated, caring citizens. You have donated your time and talent to learn how to assist your friends and neighbors in the event of community-wide public health emergencies, such as the flu clinics. You are willing to go the extra step and attend optional classes to expand your knowledge base.



Medical Reserve Corps (MRC) Coordinators for the State of Virginia were recognized by Lisa Kaplowitz, MD, MSHA, and Deputy Commissioner for the Emergency Preparedness and Response Program, for their considerable contributions to the mission of the EP and R program.

What is New with Orientation, Training, and Drills?

Beginning in August the monthly training sessions will include an orientation for new volunteers during the first hour, followed by training on various topics during the last two hours.

New RRMRC volunteers should attend an orientation and at least one training session in their first year of membership. After their first year RRMRC members should attend at least one training session each calendar year.

Statewide Drill this Fall: We anticipate having some type of drill this fall, possibly in conjunction with a large multi-state event. Details are still being worked out. We hope all volunteers will be able to participate.

Drill: Want to learn more about dispensing sites and enjoy a nice drive in the country? On May 14, from 9:00 am - 12 noon a drive-thru drill will take place in Luray at the old Wallace Business Forms building located at 10 Wallace Ave. They need lots of "patients" to drive through. Please let us know if you plan to attend. To learn more or sign up call 540-829-7350, ext. 132 or email RRMRC@vdh.virginia.gov.

LEARN MORE, UPDATE YOUR SKILLS

The following optional classes are offered to any volunteer who has completed the initial RRMRC training. To register call 540-829-7350, ext 132 or email RRMRC@vdh.virginia.gov. Class sizes are limited so call early!

Directing Traffic Safely

With the cooperation of the Culpeper County Sheriff's Office, the RRMRC is offering a class on Directing Traffic Safely. Captain Russell Lane is the instructor for the class which is scheduled for May 11 from 6:30-8 pm at Culpeper County Rescue Squad.

Adult, Infant & Child CPR Class

The April CPR class was well attended. If you are signed up for the

class on May 13, please let us know if you cannot attend. This class is currently full.



Basic First Aid

Phyllis McBride from the Fauquier Chapter of the American Red Cross will teach a Basic First Aid class on Saturday, August 27th from 8:00 am to Noon. Class size is limited to 20.

Introduction to Hazardous Material

What is a hazardous material? What do you do if you discover a hazardous material? How do you protect yourself? Come to the Introductory HazMat class on Wednesday, October 26, from 6:30-8:30 pm at the Culpeper County Rescue Squad to find out the answers.

Keep Us Informed!

Your kit is ready. You know the RRMRC should be contacting you. You don't hear from anyone. Did you change your address, email, phone number or any other part of your contact information and forget to notify the RRMRC office?

Have you renewed your license, completed a workshop, class or seminar? Remember to send a photo-copy to the RRMRC office.

WANTED: Licensed MRC Volunteers Willing to Be Trained in Smallpox Vaccine Administration

by Jo Bond, RN, Immunization Coordinator, Rappahannock-Rapidan Health District

If smallpox was used as a bioterrorism agent and released over our state, or exposure resulted from one infected individual wandering our streets, would we be prepared and able to help our residents, or would we be watching many suffer from the horrifying effects of smallpox?

Widespread smallpox vaccinations among the American public stopped in 1972. Most of us were never taught the technique of smallpox vaccination in nursing or medical school. After the events of September 11, we realized we needed a core of health care workers vaccinated and able to care for smallpox victims if our nation was exposed to such a devastating disease. During the spring and summer of 2002, we vaccinated public health officials

and hospital personnel willing to serve as front-line caregivers. If we were exposed to this disease today we would need many individuals trained in this technique of vaccination. All of our public health nurses in our district have been trained to administer smallpox vaccination. But we need more trained individuals. We need you, our MRC volunteers.

Training sessions will be held this fall and will include information on smallpox (vaccinia) vaccine, vaccine precautions and contraindications, administration technique and site care. We will be using sterile saline and working with the bifurcated needle which is only used with smallpox vaccination. Classes should last 2-3 hours and we will try to offer CEUs.

Only individuals who are currently licensed to do injections may be trained at this time.

If interested, please email RRMRC@vdh.virginia.gov or call 540-829-7350, ext. 132. We can begin setting up dates and times when we determine how many are interested. I hope to hear that many of you have signed up and I look forward to working with you again!

QUARTERLY QUIZ

1. Where did Epidemiology start?
2. When did widespread smallpox vaccinations stop in America?
3. What does PPE stand for?
4. What is the ICS?
5. When the RRMRC is activated, what should you bring with you?

“Our first response to a disaster is always a local response.”

Richard H. Carmona,
VADM
Surgeon General

OPERATIONS AND MANAGEMENT MANUAL

The Medical Reserve Corps Coordinators from across the state have been working together on the Operations and Management Manual since last December. After approval by the RRMRC Advisory Board and the Rappahannock-Rapidan Emergency Preparedness and Response Task Force the manual will be handed out to the volunteers.

Disaster Volunteer Day

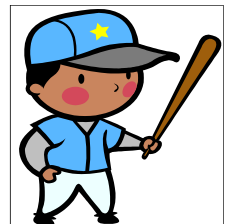
Richmond, Virginia
Arthur Ashe Center
Saturday, June 11, 2005
9 am to 5:30 pm

The City of Richmond Office of Emergency Management and state and local leaders from Citizen Corps, CERT, Medical Reserve Corps, Red Cross and VOAD in the Central Virginia area have created a partnership to plan “Disaster Volunteer Day” – a training and preparation event for disaster volunteers around the Commonwealth of Virginia. This is a one day training, planning, and recognition event for any disaster volunteer groups interested in attending from anywhere in Virginia.

The day will start off at 9:00 a.m. with a kick-off featuring a well-known local TV meteorologist as MC, with local and state officials welcoming the group and starting off the disaster day events. Emergency and disaster experts from across the state will then lead one to two hour sessions on specific types of disasters and disaster-related issues – ALL free of charge to those who wish to attend.

The day will conclude with final words of motivation for all volunteers and volunteer leaders. At the close of the event, all those who participate will receive discount tickets to the Richmond Braves game (Braves vs. Syracuse) that evening at the Diamond and other promotions for local Richmond attractions.

Interested volunteer groups and individuals MUST register in advance by contacting Judy Marston with the Virginia Department of Health (Judith.Marston@vdh.virginia.gov or 804-864-7036) or Heather King with the Virginia Department of Emergency Management (heather.king@vdem.virginia.gov or 804-897-6500, ext.6594).



Epidemiology: Who, What, Where, and Why

by April Achter, Rappahannock-Rapidan Epidemiologist

“The most terrible outbreak of cholera which ever occurred in this kingdom, is probably that which took place in Broad Street, Golden Square, and the adjoining streets, a few weeks ago. Within two hundred and fifty yards of the spot where Cambridge Street joins Broad Street, there were upwards of five hundred fatal attacks of cholera in ten days. The mortality in this limited area probably equals any that was ever caused in this country, even by the plague; and it was much more sudden, as the greater number of cases terminated in a few hours.”

Written by Dr. John Snow, the above paragraph depicts the 1854 cholera outbreak in London, England. During this time, no one knew how or why certain contagions spread. It would be years before scientists implicated disease causing microbes too small to identify by the naked eye. Yet with a creative mind and a desire to help, John Snow created the epidemiological techniques that continue to be used all over the world today.

If you look up epidemiology in the dictionary, it will read “the scientific discipline studying the incidence, distribution, and control of disease in a population”. In English, that means finding out who is getting sick, and where and why and how.

The first step in an epidemiological investigation is to confirm the diagnosis. Today we might rely on lab tests; Dr. Snow diagnosed cholera in patients with watery diarrhea. The next step includes defining a “case”, which is a person ill with the disease being investigated. This

helps determine the magnitude of the outbreak. Dr. Snow defined a case as a person who died from watery diarrhea. To find cases, he reviewed death records and interviewed clinicians, family and neighbors of ill persons.

Once he had a list of cases, Dr. Snow began step three. He examined the affected population by person, place and time. Most epidemiologists use a line list, which is a list of cases by date of onset, age, gender, address, etc. Although there are numerous computer programs available today, many persons still rely on the pencil and paper line listing to get started!

When Dr. Snow reviewed the data, he found that most of the cases were centered around one water pump, the Broad Street pump. Step 4 of an investigation includes implementing control measures to prevent others from becoming ill. John Snow advised officials to remove the handle of the Broad Street pump and this halted the cholera outbreak.

Answers to Quiz on page 2

- Question 1 London, England
- Question 2 1972
- Question 3 Personal Protective Equipment
- Question 4 ICS is the Incident Command System, which is recognized as an effective system for managing emergencies.
- Question 5 Proof of Identification, your RRMRC ID badge, black bag and t-shirt. Do you know where they are?



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DATES TO REMEMBER

May 11, 2005
Directing Traffic Safely (optional)
Place: Culpeper County Rescue Squad
Time: 6:30-8:00 pm

May 13
American Heart Association Adult, Child, and Infant CPR (optional)
Place: Culpeper County Library
Time: 12 noon - 4:00 pm

May 24, 2005
Orientation and Training
Place: Fauquier Hospital
Time: Tuesday 9:00am-12 Noon

June 14, 2005
Orientation and Training
Place: Orange Rescue Squad
Time: Tuesday 6:00-9:00 pm

August 27, 2005
Red Cross Basic First Aid (optional)
Place: Culpeper County Rescue Squad
Time: 8 am - Noon

October 26, 2005
Introduction to Hazmat (optional)
Place: Culpeper County Rescue Squad
Time: 6:30-8:30 pm

Vision

Volunteers
Protecting Virginia's
Public Health

Mission

To serve the counties of Culpeper, Fauquier, Madison, Orange and Rappahannock by establishing local teams of public health volunteers to strengthen the public health infrastructure and improve Emergency Preparedness and Response.